Revised 03/06 WDNY

## UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK



# FORM TO BE USED IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

(Prisoner Complaint Form)

All material filed in this Court is now available via the INTERNET. See Pro Se Privacy Notice for further information.

1. (	CAPTION OF ACTION	17	CV	6884 E
A. Full Name And Prisoner Number of Pla pauperis status, each plaintiff must submit an in formation considered will be the plaintiff who filed an application	a pauperis application and a signed	aintiff files ( Authorizati	this actio	on and seeks in form e only plaintiff to b
1. Kevin Cleveland Din 17131629	·			
2				
	-VS-			
B. Full Name(s) of Defendant(s) NOTE: Puthe court may not consider a claim against anyone not you may continue this section on another sheet of paper 1. Reshester pulice Department	identified in this section as a defenda r if you indicate below that you have d 4.	nt. If you ho one so.	ive more	than six defendants
2. OFFICER A ROCZMIT				
3	6			
This is a civil action seeking relief and/or damages. United States. This action is brought pursuant to 4 28 U.S.C. §§ 1331, 1343(3) and (4), and 2201.	EMENT OF JURISDICTION s to defend and protect the rights § 12 U.S.C. § 1983. The Court has ju	guaranteed irisdiction	by the (	Constitution of the
3. PAE	RTIES TO THIS ACTION			
PLAINTIFF'S INFORMATION NOTE: To list				_
Name and Prisoner Number of Plaintiff: <u>Kevin</u>	Cleveland Din 1781629			
Present Place of Confinement & Address: upslo	ste Cornertecood Facility	PO Box	3001	
Malone, New york 12953				
Name and Prisoner Number of Plaintiff:				
Present Place of Confinement & Address:				

	ENDANT'S INFORMATION NOTE: To provide information about more defendants than there is room for here, use this to another sheet of paper.
Name	e of Defendant: Rochester police Department
	oplicable) Official Position of Defendant: police Department of Rochester my
	oplicable) Defendant is Sued inIndividual and/orOfficial Capacity
	ess of Defendant: Rochester police Department
	135 Exchange Blud Roch My 14614
Nam	e of Defendant: office म Roca417
(If ap	pplicable) Official Position of Defendant: police officer with R. P. 1)
	oplicable) Defendant is Sued in Individual and/or Official Capacity
Addı	ress of Defendant: 185 Exchange BluD
	Rochester, uy 14614
	·
Nam	e of Defendant:
(If ap	oplicable) Official Position of Defendant:
(If ap	oplicable) Defendant is Sued inIndividual and/orOfficial Capacity
Addr	ress of Defendant:
	· · · · · · · · · · · · · · · · · · ·
-	
	4. PREVIOUS LAWSUITS IN STATE AND FEDERAL COURT
Α.	Have you begun any other lawsuits in state or federal court dealing with the same facts involved in this action?  Yes No
	es, complete the next section. NOTE: If you have brought more than one lawsuit dealing with the same facts as this on, use this format to describe the other action(s) on another sheet of paper.  Name(s) of the parties to this other lawsuit:
	Plaintiff(s):
	Defendant(s):
2.	Court (if federal court, name the district; if state court, name the county):
3.	Docket or Index Number:
4.	Name of Judge to whom case was assigned:

## 

5.	The approximate date the action was filed: $\sqrt{2}$
6.	What was the disposition of the case?
	Is it still pending? Yes No,
	lf not, give the approximate date it was resolved.
	Disposition (check the statements which apply):
	<u>Dismissed</u> (check the box which indicates why it was dismissed):
	By court sua sponte as frivolous, malicious or for failing to state a claim upon which relief can be granted;
	By court for failure to exhaust administrative remedies;
	By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
	By court due to your voluntary withdrawal of claim;
	Judgment upon motion or after trial entered for
	plaintiff
	defendant.
	Yes No_ $$ s, complete the next section. NOTE: If you have brought more than one other lawsuit dealing with your imprisonment, his same format to describe the other action(s) on another sheet of paper.
1.	Name(s) of the parties to this other lawsuit:
	Plaintiff(s):
	Defendant(s):
2.	District Court:
3.	Docket Number:
4.	Name of District or Magistrate Judge to whom case was assigned:
5.	The approximate date the action was filed:
6.	What was the disposition of the case?
	Is it still pending? Yes No
	If not, give the approximate date it was resolved.

Disposition (cl	heck the statements which apply):
Dismisse	ed (check the box which indicates why it was dismissed):
	By court sua sponte as frivolous, malicious or for failing to state a claim upon which relief can be granted;
	By court for failure to exhaust administrative remedies;
	By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
	By court due to your voluntary withdrawal of claim;
Judgmen	nt upon motion or after trial entered for
[	plaintiff
(	defendant.

#### 5. STATEMENT OF CLAIM

For your information, the following is a list of some of the most frequently raised grounds for relief in proceedings under 42 U.S.C. § 1983. (This list does not include <u>all</u> possible claims.)

- Religion
- Access to the Courts
- · Search & Seizure

- Free Speech
- False Arrest
- Malicious Prosecution

- Due Process
- Excessive Force
- · Denial of Medical Treatment

- Equal Protection
- Failure to Protect
- · Right to Counsel

Please note that it is not enough to just list the ground(s) for your action. You must include a statement of the facts which you believe support each of your claims. In other words, tell the story of what happened to you but do not use legal jargon.

Fed.R.Civ.P. 8(a) states that a pleading must contain "a short and plain statement of the claim showing that the pleader is entitled to relief." "The function of pleadings under the Federal Rules is to give fair notice of the claim asserted. Fair notice is that which will enable the adverse party to answer and prepare for trial, allow the application of res judicata, and identify the nature of the case so it may be assigned the proper form of trial." Simmons v. Abruzzo, 49 F.3d 83, 86 (2d Cir. 1995). Fed.R.Civ.P. 10(b) states that "[a]ll averments of claim ... shall be made in numbered paragraphs, the contents of each of which shall be limited as far a practicable to a single set of circumstances."

#### **Exhaustion of Administrative Remedies**

Note that according to 42 U.S.C. § 1997e(a), "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prison er confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

You must provide information about the extent of your efforts to grieve, appeal, or otherwise exhaust your administrative remedies, and you must attach copies of any decisions or other documents which indicate that you have exhausted your remedies for each claim you assert in this action.

A. FIRST CLAIM: On (date of the incident) September 27, 2016 ,
defendant (give the name and position held of each defendant involved in this incident)
Pexhester suizce officer
did the following to me (briefly state what each defendant named above did):
used exercise force when accepting detendant, officer # 2417 purched, kecked
Tere 35 show injuries that plainlift Sustained from office # 2417. Office #
2417 Alleged that plaistiff was A organisted Crane/ Family and Associal suspect,
but was found not quilty several months later (are was documested do topolo True
The constitutional basis for this claim under 42 U.S.C. § 1983 is: False Acres & Excessive Force,
Malicious prosecution
The relief I am seeking for this claim is (briefly state the relief sought):
professional teprimand and despinary action
Exhaustion of Your Administrative Remedies for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what was the result?
Did you appeal that decision?YesNo If yes, what was the result?
Attach copies of any documents that indicate that you have exhausted this claim.
If you did not exhaust your administrative remedies, state why you did not do so:
1983 is First Step in Exhausting Romedies
A CYCOND CLAIM O (La Calada de Calad
A. SECOND CLAIM: On (date of the incident),  defendant (give the name and position held of each defendant involved in this incident)
detendant (Bive the name and hostrion held of each detendant involved in this incident)

## 

did the following to me (briefly state what each defendant named above did):
· · · · · · · · · · · · · · · · · · ·
The constitutional basis for this claim under 42 U.S.C. § 1983 is:
The relief I am seeking for this claim is (briefly state the relief sought):
Exhaustion of Your Administrative Remedies for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what was the result?
Did you appeal that decision? Yes No If yes, what was the result?
Attach copies of any documents that indicate that you have exhausted this claim.
If you did not exhaust your administrative remedies, state why you did not do so:
If you have additional claims, use the above format and set them out on additional sheets of paper.
6. RELIEF SOUGHT
Summarize the relief requested by you in each statement of claim above.
I Am Requesting for Discolinary action agreement R.P.D OFFECER # 2417 Also Muntary
relief for days Spent Fucureerated, loss of my Employment due to this Situation
Do you want a jury trial? Yes V No
Do you want a link mat. A cs. A Mo

## 

(date)  OTE: Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.	decla	re under penalty of perjury that the foregoing is true and correct.
(date) IOTE: Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.	xecuted	d on
OTE: Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.		(date)
	OTE:	Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.
Signature(s) of Plaintiff(s)		Signature(s) of Plaintiff(s)